

ER E
ISSUE SLIP STAPLE AREA (for additional cross-references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|-------------|---------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | EYL | 32 | 3-13-01 |
| RESPONSE FORMALITY REVIEW | SG | 706 1077 | 6/20/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral) Canceled A Appeal
+ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|---------|
| 1 | ✓ | ✓ | 1/22/01 |
| 2 | ✓ | ✓ | 1/24/01 |
| 3 | ✓ | ✓ | 1/24/01 |
| 4 | ✓ | ✓ | 1/24/01 |
| 5 | ✓ | ✓ | 1/24/01 |
| 6 | ✓ | ✓ | 1/24/01 |
| 7 | ✓ | ✓ | 1/24/01 |
| 8 | ✓ | ✓ | 1/24/01 |
| 9 | ✓ | ✓ | 1/24/01 |
| 10 | ✓ | ✓ | 1/24/01 |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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